PTO/SB/05 (4/98)

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UTILITY PATENT APPLICATION **TRANSMITTAL**

Attorney Docket No. 38-0014 First Inventor or Application Identifier Thomas J. Gritzmacher

BILLING SYSTEM AND METHOD FOR NETWORK

s under 37 C.F.R. § 1.53(b)) Express Mail Label No. EF238909414US

	Assistant Commissioner for Patents						
APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.	ADDRESS TO: Box Patent Application Washington, DC, 20231						
1. X * Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing) 2. X Specification [Total Pages] (preferred arrangement set forth below) - Descriptive title of the Invention - Cross References to Related Applications - Statement Regarding Fed sponsored R & D - Reference to Microfiche Appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure 3. X Drawing(s) (35 U.S.C. 113) [Total Sheets] 4. Oath or Declaration [Total Pages] a. Newly executed (original or copy) b. Copy from a prior application (37 C.F.R. § 1.63 (for continuation/divisional with Box 16 completed) i. DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b). NOTE FOR ITEMS 1 & 13 IN ORDER TO BE ENTITIED TO PAY SMALL ENTITY STATEMENT IS REQUIRED (37 C.F.R. § 1.27), EXCEPTIFIED IN A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. § 1.27), EXCEPTIFIED OF FILED IN A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. § 1.27), EXCEPTIFIED OF APPLICATION IS RELIED UPON (37 C.F.R. § 1.27), EXCEPTIFIED OF APPLICATION IS RELIED UPON (37 C.F.R. § 1.27), EXCEPTIFIED OF APPLICATION IS RELIED UPON (37 C.F.R. § 1.27), EXCEPTIFIED OF APPLICATION IS RELIED UPON (37 C.F.R. § 1.27), EXCEPTIFIED OF APPLICATION IS RELIED UPON (37 C.F.R. § 1.27), EXCEPTIFIED OF APPLICATION IS RELIED UPON (37 C.F.R. § 1.27), EXCEPTIFIED UPON (37 C.F.R. § 1.27), EXCEPTI	Microfiche Computer Program (Appendix) 6. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. Computer Readable Copy b. Paper Copy (identical to computer copy) c. Statement verifying identity of above copies ACCOMPANYING APPLICATION PARTS 7. Assignment Papers (cover sheet & document(s)) 8. X 37 C.F.R.§3.73(b) Statement X Power of (when there is an assignee) 9. English Translation Document (if applicable) 10. X Statement (IDS)/PTO-1449 X Copies of IDS Citations 11. Preliminary Amendment 12. X Return Receipt Postcard (MPEP 503) (Should be specifically itemized) * Small Entity Statement filed in prior application Statement(s) (if foreign priority is claimed) 14. (Group / Art Unit: Supply the requisite information below and in a preliminary amendment: Group / Art Unit: 15. Group / Art Unit: 16. of the prior application, from which an oath or declaration is supplied						
reference. The incorporation can only be relied upon when a portion	nying continuation or divisional application and is hereby incorporated by has been inadvertently omitted from the submitted application parts.						
T7. CORRESPONDENCE ADDRESS 30050 or □ Correspondence address below (Insert Customer No. or Attach bar code label here)							
Name							
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City State	Zip Code						
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Name (Pnnt/Type) Noel F. Heal Signature	Registration No. (Attorney/Agent) 26,074 Date 11/08/01						

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PTO/SB/17 (12/99)

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Patent fees are subject to annual revision. Small Entity payments must be supported by a small entity statement, otherwise large entity fees must be paid. See Forms PTO/SB/09-12. See 37 C.F.R. §§ 1.27 and 1.28.

TOTAL AMOUNT OF PAYMENT

WARNING:

(\$) 1	1.21	4	00

Complete if Known				
Application Number				
Filing Date	November 8, 2001			
First Named Inventor	Thomas J. Gritzmacher			
Examiner Name	Unassigned			
Group / Art Unit	N/A			
Attorney Docket No.	38-0014			

METHOD OF PAYMENT (check one)	<u> </u>			F	EE CALCUL	ATION (co	ontinued)	
1. The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to: 3. ADDITIONAL FEES Large Entity Small Entity								
Deposit Account Number	Cod		Cod	e (\$)	Fee	Descriptio	n	Fee Paid
Number 20-1313	105	130	205	65	Surcharge - late	filing fee or o	oath	0.00
Deposit Account TRW Inc.	127	50	227	25	Surcharge - late cover sheet.	provisional fi	iling fee or	0.00
Name TTC VY THE.	139	39 130 139 130 Non-English sp				ecification		0.00
Charge Any Additional Fee Required Under 37 CFR §§ 1 16 and 1 17	147	2,520	147	2,520	For filing a requ	est for reexa	mination	0.00
2. Payment Enclosed:		920*	112	920*	Requesting publication	R prior to	0.00	
Check Money Other	113	1,840*	113	1,840*	Requesting publ Examiner action	lication of SIF	R after	0.00
FEE CALCULATION	115	110	215	55	Extension for rep	•		0.00
1. BASIC FILING FEE	116	380	216	190	Extension for rep	-		0.00
Large Entity Small Entity	117	870	217	435	Extension for rep	ply within thin	d month	0.00
Fee Fee Fee Fee Description Code (\$) Code (\$) Fee Paid	118	1,360	218	680	Extension for rep	ply within fou	rth month	0.00
104 600 204 24E	128	1,850	228	925	Extension for rep	•	month	0.00
106 310 206 155 Design filling fee 740.00	119	300	219	150	Notice of Appeal			0.00
107 480 207 240 Plant filing fee	120	300	220	150	Filing a brief in s	• •	appeal	0.00
108 690 208 345 Reissue filing fee	121	260	221	130	Request for oral	_		0.00
114 150 214 75 Provisional filing fee	138	1,510		1,510	Petition to institu	•		0.00
SUBTOTAL (1) (\$) 740.00	140	110	240	55	Petition to revive			0.00
	1	1,210	241	605	Petition to revive		nai	0.00
2. EXTRA CLAIM FEES Fee from	142 143	1,210 430		605 215	Utility issue fee (Design issue fee	,		0.00
Extra Claims below Fee Paid Total Claims 37 -20** = 17 X 18 = 306	143	580	243	290	Plant issue fee	•		0 00
Independent 5 2** - 2 V XZ 1.00	122	130	122	130	Petitions to the (0.00		
Claims U 108 Multiple Dependent - ()	123	50	123	50	Petitions related			0.00
**or number previously paid, if greater, For Reissues, see below	126	240	126	240	Submission of Ir			0.00
Large Entity Small Entity	581	40	581	40				0.00
Fee Fee Fee Fee Fee Description Code (\$)	146	690	246		Recording each property (times r	number of pro	operties)	0.00
103 18 203 9 Claims in excess of 20 102 78 202 39 Independent claims in excess of 3				345	Filing a submissi (37 CFR § 1.129	9(a))	•	0.00
104 260 204 130 Multiple dependent claim, if not paid	149	690	249	345	For each addition examined (37 Cf			0.00
109 78 209 39 ** Reissue independent claims over original patent	Other	fee (sp	ecify)		oxammod (or or	111 3 1.120(0)	<i>"</i>	0.00
110 18 210 9 ** Reissue claims in excess of 20 and over original patent							0.00	
SUBTOTAL (2) (\$) 474.00 • Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 0.00								
SUBMITTED BY Complete (if applicable)								
Name (Print/Type) Noel F. Heal		Registr (Attorne		No. 2	26,074	Telephone	310-812-	4910
Signature Val Hole						Date	11/08/	01

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